

EXHIBIT A

ALERT: FLOODING AND SEVERE WEATHER IN T

USPS Tracking®

Tracking Number:

9589071052700731649933

Copy

[Add to Informed Delivery \(https://informeddelivery.usps.com/\)](https://informeddelivery.usps.com/)

U.S. Postal Service™ **CERTIFIED MAIL® RECEIPT**
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee	
\$	
Extra Services & Fees (check box, add fee as appropriate)	
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____
<input type="checkbox"/> Return Receipt (electronic)	\$ _____
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____
<input type="checkbox"/> Adult Signature Required	\$ _____
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
Postage	
\$	
Total Postage and Fees	
\$ 9589 0710 5270 0731 6499 33	
Sent To <i>Angel Leonessa</i>	
City, State, ZIP+4 <i>Burlington, CT 06013</i>	

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Feedback

Latest Update

Your item has been delivered to the original sender at 11:41 am on June 14, 2024 in BOSTON, MA 02210.

Get More Out of USPS Tracking:

USPS Tracking Plus®

Delivered

Delivered, To Original Sender

BOSTON, MA 02210

June 14, 2024, 11:41 am

Arrived at USPS Regional Facility

BOSTON MA DISTRIBUTION CENTER

June 13, 2024, 2:48 pm

Unclaimed/Being Returned to Sender

BURLINGTON, CT 06013

June 3, 2024, 12:40 pm

Notice Left (No Authorized Recipient Available)

BURLINGTON, CT 06013

May 24, 2024, 3:41 pm

In Transit to Next Facility

May 23, 2024

Unclaimed/Being Returned to Sender

BURLINGTON, CT 06013

May 20, 2024, 10:01 am

Reminder to Schedule Redelivery of your item

May 4, 2024

Notice Left (No Authorized Recipient Available)

BURLINGTON, CT 06013

April 29, 2024, 5:57 pm

Departed USPS Regional Facility

HARTFORD CT DISTRIBUTION CENTER

April 27, 2024, 10:21 pm

Arrived at USPS Regional Facility

HARTFORD CT DISTRIBUTION CENTER

April 27, 2024, 10:20 pm

Arrived at USPS Regional Facility

BOSTON MA DISTRIBUTION CENTER

April 26, 2024, 10:49 pm

[Hide Tracking History](#)

What Do USPS Tracking Statuses Mean? (<https://faq.usps.com/s/article/Where-is-my-package>)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less ▲

Track Another Package

Enter tracking or barcode numbers

ALERT: FLOODING AND SEVERE WEATHER IN 1

USPS Tracking®

Tracking Number:

9589071052700731649926[Copy](#)[Add to Informed Delivery](https://informeddelivery.usps.com/)

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee
\$

Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ _____
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage
\$

Total Postage and Fees
\$ 9589 0710 5270 0731 6499 26

Sent To: *Amel Legassa - FMC Devens*
 Street and Apt. No., or Box No.
42 Patten Road
 City, State: *Ayer, MA 01432*

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Postmark
Here

Feedback

Latest Update

Your item has been delivered and is available at a PO Box at 7:26 am on April 29, 2024 in AYER, MA 01432.

Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Delivered

Delivered, PO Box

AYER, MA 01432

April 29, 2024, 7:26 am

Arrived at Post Office

AYER, MA 01432

April 29, 2024, 7:16 am

Arrived at USPS Regional Facility

SHREWSBURY MA DISTRIBUTION CENTER

April 27, 2024, 7:42 am

Arrived at USPS Regional Facility

BOSTON MA DISTRIBUTION CENTER

April 26, 2024, 10:46 pm

[Hide Tracking History](#)

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature </p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>J. DiRenzo</u></p> <p>C. Date of Delivery <u>4/29/24</u></p>	
<p>1. Article Addressed to:</p> <p>Ariel Legassa 84414-509 FMC Devens P.O. Box 879 Ayer, MA 01432</p> <p></p> <p>9590 9402 8538 3186 4450 25</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input type="checkbox"/> No If YES, enter delivery address below:</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0731 6498 03</p>		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
PS Form 3811, July 2020 PSN 7530-02-000-9053			
Domestic Return Receipt			

<p>U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i></p>	
<p>For delivery information, visit our website at www.usps.com®.</p>	
OFFICIAL USE	
<p>Certified Mail Fee \$ Extra Services & Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p> <p>Postage \$ Total Postage and Fees \$ <u>9589 0710 5270 0731 6498 03</u></p>	<p>Postmark Here</p>
<p>Sent To <u>Ariel Legassa 84414-509</u> <u>FMC Devens - P.O. Box 879</u> <u>Ayer, MA 01432</u></p>	
<p>Street and Apt. No., or PO Box No. City, State, ZIP+4</p>	
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047</p>	
<p>See Reverse for Instructions</p>	

CERTIFIED MAIL®

UNITED STATES ATTORNEY'S OFFICE

DISTRICT OF MASSACHUSETTS
 JOHN J. MOAKLEY COURTHOUSE
 SUITE 9200
 1 COURTHOUSE WAY
 BOSTON, MA 02210

OFFICIAL BUSINESS

May 16 2024



9589 0710 5270 0731 6499 40

-R-T-S- 01742-RES-1N *95 05/14/24

RETURN TO SENDER
 UNCLAIMED
 UNABLE TO FORWARD
 RETURN TO SENDER

RECEIVED
 05/14/24
 RETURN TO SENDER
 1ST NOTICE
 MAIL

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$
 Extra Services & Fees (check box, add fee as appropriate)
 Return Receipt (hardcopy) \$ _____
 Return Receipt (electronic) \$ _____
 Certified Mail Restricted Delivery \$ _____
 Adult Signature Required \$ _____
 Adult Signature Restricted Delivery \$ _____

Postage \$
 Total Postage and Fees \$ 9589 0710 5270 0731 6499 40

Postmark Here

Sent To E. Peter Parker
 Street and Apt. No. or PO Box No.
 33 Bradford Street
 Concord, MA 01742

PS Form 3800, January 2023 PSN 7590-02-000-9047 See Reverse for Instructions

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

E. Peter Parker, Esq.
 33 Bradford Street
 Concord, MA 01742



2. Article Number (Transfer from service label)

9589 0710 5270 0731 6499 40

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X

 Agent
 Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1? Yes
 If YES, enter delivery address below: No

3. Service Type

- Priority Mail Express®
- Adult Signature
- Registered Mail™
- Adult Signature Restricted Delivery
- Registered Mail Restricted Delivery
- Certified Mail®
- Certified Mail Restricted Delivery
- Collect on Delivery
- Collect on Delivery Restricted Delivery
- Insured Mail
- Insured Mail Restricted Delivery
- Signature Confirmation™
- Signature Confirmation Restricted Delivery

UNITED STATES ATTORNEY'S OFFICE
DISTRICT OF MASSACHUSETTS
JOHN J. MOAKLEY COURTHOUSE,
SUITE 9200
1 COURTHOUSE WAY
BOSTON, MA 02210
OFFICIAL BUSINESS



E. Peter Parker, Esq.
Law Office of E. Peter Parker
151 Merrimac Street
Boston, MA 02115

021 18221764 大连
52215738112

AFPm

NIXIE 015 DE 1 0006/21/23

RETURN TO SENDER
NOT DELIVERABLE AS ADDRESSED
UNABLE TO FORWARD

BC: 02210301100 *0821-00914-25-45

ALERT: FLOODING AND SEVERE WEATHER IN THE AREA

USPS Tracking®

Tracking Number:

9589071052700731649964[Copy](#)[Add to Informed Delivery \(<https://informeddelivery.usps.com/>\)](#)

U.S. Postal Service™
CERTIFIED MAIL® RECEIPT
Domestic Mail Only

For delivery information, visit our website at www.usps.com®.

OFFICIAL USE

Certified Mail Fee \$

Extra Services & Fees (check box, add fee as appropriate)

Return Receipt (hardcopy) \$ _____

Return Receipt (electronic) \$ _____

Certified Mail Restricted Delivery \$ _____

Adult Signature Required \$ _____

Adult Signature Restricted Delivery \$ _____

Postage \$

Total Postage and Fees \$ 1589 0710 5270 0731 6499 64

Sent To Nilda Legassa

Street [REDACTED]

City, State, Zip [REDACTED] CT 06013

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions

Feedback

Latest Update

Your item has been delivered to the original sender at 11:41 am on June 14, 2024 in BOSTON, MA 02210.

Get More Out of USPS Tracking:

[USPS Tracking Plus®](#)

Delivered

Delivered, To Original Sender

BOSTON, MA 02210

June 14, 2024, 11:41 am

Arrived at USPS Regional Facility

BOSTON MA DISTRIBUTION CENTER

June 13, 2024, 2:48 pm

Unclaimed/Being Returned to Sender

BURLINGTON, CT 06013

June 3, 2024, 12:40 pm

Notice Left (No Authorized Recipient Available)

BURLINGTON, CT 06013

May 24, 2024, 3:41 pm

In Transit to Next Facility

May 23, 2024

Unclaimed/Being Returned to Sender

BURLINGTON, CT 06013
May 20, 2024, 10:01 am

Reminder to Schedule Redelivery of your item

May 4, 2024

Notice Left (No Authorized Recipient Available)

BURLINGTON, CT 06013
April 29, 2024, 5:57 pm

Departed USPS Regional Facility

HARTFORD CT DISTRIBUTION CENTER
April 27, 2024, 10:21 pm

Arrived at USPS Regional Facility

HARTFORD CT DISTRIBUTION CENTER
April 27, 2024, 8:53 pm

Arrived at USPS Regional Facility

BOSTON MA DISTRIBUTION CENTER
April 27, 2024, 1:13 am

[Hide Tracking History](#)

What Do USPS Tracking Statuses Mean? (<https://faq.usps.com/s/article/Where-is-my-package>)

Text & Email Updates



USPS Tracking Plus®



Product Information



See Less

[Track Another Package](#)

Enter tracking or barcode numbers

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY																	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <input checked="" type="checkbox"/> <i>John A. Bell</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>John A. Bell</i> <input type="checkbox"/> C. Date of Delivery <i>8/17/17</i></p> <p>D. Is delivery address different from item 1? If YES, enter delivery address below</p>																	
<p>1. Article Addressed to: Nilda Leaussa Burlington, CT 06013</p>		<p>2. Article Number (Transfer from service label) 9589 0710 5270 0731 6484 93</p>																	
<p>3. Service Type</p> <table> <tr> <td><input type="checkbox"/> Adult Signature</td> <td><input type="checkbox"/> Priority Mail Express®</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td><input type="checkbox"/> Registered Mail™</td> </tr> <tr> <td><input checked="" type="checkbox"/> Certified Mail®</td> <td><input type="checkbox"/> Registered Mail Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td><input checked="" type="checkbox"/> Signature Confirmation™</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery</td> <td><input type="checkbox"/> Signature Confirmation Restricted Delivery</td> </tr> <tr> <td><input type="checkbox"/> Collect on Delivery Restricted Delivery</td> <td></td> </tr> <tr> <td>Insured Mail</td> <td></td> </tr> <tr> <td>Insured Mail Restricted Delivery (over \$500)</td> <td></td> </tr> </table>				<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®	<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™	<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery	<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Signature Confirmation™	<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery	<input type="checkbox"/> Collect on Delivery Restricted Delivery		Insured Mail		Insured Mail Restricted Delivery (over \$500)	
<input type="checkbox"/> Adult Signature	<input type="checkbox"/> Priority Mail Express®																		
<input type="checkbox"/> Adult Signature Restricted Delivery	<input type="checkbox"/> Registered Mail™																		
<input checked="" type="checkbox"/> Certified Mail®	<input type="checkbox"/> Registered Mail Restricted Delivery																		
<input type="checkbox"/> Certified Mail Restricted Delivery	<input checked="" type="checkbox"/> Signature Confirmation™																		
<input type="checkbox"/> Collect on Delivery	<input type="checkbox"/> Signature Confirmation Restricted Delivery																		
<input type="checkbox"/> Collect on Delivery Restricted Delivery																			
Insured Mail																			
Insured Mail Restricted Delivery (over \$500)																			
Domestic Return Receipt																			

PS Form 3811, July 2020 PSN 7530-02-000-9053

<p>U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i></p>											
<p>For delivery information, visit our website at www.usps.com</p>											
<p>93 9484 0731 6484</p>											
<p>Certified Mail Fee \$</p>											
<p>Extra Services & Fees (check box, add fee as appropriate)</p> <table> <tr> <td><input type="checkbox"/> Return Receipt (hardcopy)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Return Receipt (electronic)</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Certified Mail Restricted Delivery</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Required</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Adult Signature Restricted Delivery</td> <td>\$ _____</td> </tr> </table>		<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____	<input type="checkbox"/> Return Receipt (electronic)	\$ _____	<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____	<input type="checkbox"/> Adult Signature Required	\$ _____	<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____
<input type="checkbox"/> Return Receipt (hardcopy)	\$ _____										
<input type="checkbox"/> Return Receipt (electronic)	\$ _____										
<input type="checkbox"/> Certified Mail Restricted Delivery	\$ _____										
<input type="checkbox"/> Adult Signature Required	\$ _____										
<input type="checkbox"/> Adult Signature Restricted Delivery	\$ _____										
<p>5270 0710 5270 0731 6484 93</p>											
<p>Postage \$</p>											
<p>9589 0710 5270 0731 6484 93</p>											
<p>Total Postage and Fees \$ 1589 0710 5270 0731 6484 93</p>											
<p>Sent To Nilda Leaussa</p>											
<p>9589 Burlington, CT 06013</p>											
<p>City, State, ZIP+4</p>											
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>											

8/14

Postmark
Here

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature </p> <p><input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>1. Article Addressed to:</p> <p>Christina Lindberg, Esq. Miner Siddall LLP 101 Federal Street Suite 650 Boston, MA 02110</p> <p></p> <p>9590 9402 8538 3186 4450 94</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p> <p></p> <p>2. Article Number (Transfer from carrier label)</p> <p>9 0710 5270 0731 6499 71</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>			

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT Domestic Mail Only	
<p>For delivery information, visit our website at www.usps.com.</p> <p></p>	
<p>Certified Mail Fee \$</p> <p>Extra Services & Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p> <p>Postage \$</p> <p>Total Postage and Fees \$ 9589 0710 5270 0731 6499 71</p> <p>Sent To Christina Lindberg, Esq.</p> <p>Street and Apt. No., or P.O. Box No. 101 Federal Street Suite 650 Boston, MA 02110</p> <p>City, State, Zip Code</p>	<p>Postmark Here</p>
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions</p>	

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature</p> <p><input checked="" type="checkbox"/> <i>Brian M. M.</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <i>Brian M. M.</i> C. Date of Delivery</p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>1. Article Addressed to:</p> <p>Wells Fargo AUTO P.O. Box 997517 Sacramento, CA 95899-7517</p>		<p>Priority Mail Express® registered Mail™ registered Mail Restricted delivery</p> <p><input checked="" type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0731 6497 80</p>		<p>Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053 Domestic Return Receipt</p>			

<p>U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i></p>		
<p>For delivery information, visit our website at www.usps.com.</p>		
OFFICIAL USE		
<p>9589 0710 5270 0731 6497 80</p> <p>Certified Mail Fee \$</p> <p>Extra Services & Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p> <p>Postage \$</p> <p>Total Postage and Fees \$ 9589 0710 5270 0731 6497 80</p> <p>Sent To <i>Wells Fargo AUTO</i> <i>P.O. Box 997517</i> <i>Sacramento, CA 95899-7517</i></p>	<p>Postmark <i>Here</i></p>	
<p>Street and Apt. No. or P.O. Box No. _____ City, State, ZIP+4® _____</p>		<p>See Reverse for Instructions</p>
<p>PS Form 3800, January 2023 PSN 7530-02-000-9047</p>		

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<ul style="list-style-type: none"> ■ Complete items 1, 2, and 3. ■ Print your name and address on the reverse so that we can return the card to you. ■ Attach this card to the back of the mailpiece, or on the front if space permits. 		<p>A. Signature <i>X Lynn Michael</i></p> <p><input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name)</p> <p>C. Date of Delivery</p>	
<p>1. Article Addressed to:</p> <p>Robertson Airport 62 Johnson Ave Plainville, CT 06062</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
 9590 9402 8538 3186 4451 62		<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p> <p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Signature Confirmation™ <input type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>2. Article Number (Transfer from service label)</p> <p>9589 0710 5270 0731 6497 97</p>		<p>Domestic Return Receipt</p>	

PS Form 3811, July 2020 PSN 7530-02-000-9053

U.S. Postal Service™ CERTIFIED MAIL® RECEIPT <i>Domestic Mail Only</i>	
<p>For delivery information, visit our website at www.usps.com®.</p> <p>OFFICIAL USE</p>	
<p>Certified Mail Fee \$</p> <p>Extra Services & Fees (check box, add fee as appropriate)</p> <p><input type="checkbox"/> Return Receipt (hardcopy) \$ _____ <input type="checkbox"/> Return Receipt (electronic) \$ _____ <input type="checkbox"/> Certified Mail Restricted Delivery \$ _____ <input type="checkbox"/> Adult Signature Required \$ _____ <input type="checkbox"/> Adult Signature Restricted Delivery \$ _____</p> <p>Postage \$</p> <p>Total Postage and Fees \$ 1589 0710 5270 0731 6497 97</p>	<p>Postmark Here</p>

PS Form 3800, January 2023 PSN 7530-02-000-9047 See Reverse for Instructions